15-cv-01261-TCB-LTW Document 2 Filed 05/12/15 Page 1 of 11 U.S.D.C. - Atlanta 2 1 2015 IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF GEORGIA DIVISION (Print your full name Plaintiff pro se. CIVIL ACTION FILE NO. 1:15-CV-1261 V. Paper Julius
Pizzer (Print full name of each defendant; an employer is usually the defendant) Defendant(s).

PRO SE EMPLOYMENT DISCRIMINATION COMPLAINT FORM

Claims and Jurisdiction

 This employment discrimination lawsuit is brought under (check only those that apply):

Title VII of the Civil Rights Act of 1964, 42 U.S.C. §§ 2000e et seq., for employment discrimination on the basis of race, color, religion, sex, or national origin, or retaliation for exercising rights under this statute.

NOTE: To sue under Title VII, you generally must have received a notice of right-to-sue letter from the Equal Employment Opportunity Commission ("EEOC").

	Age Discrimination in Employment Act of 1967, 29 U.S.C. § 621 et seq., for employment discrimination against persons age 40 and over, or retaliation for exercising rights under this statute.					
,	NOTE : To sue under the Age Discrimination in Employment Act, you generally must first file a charge of discrimination with the EEOC.					
	Americans With Disabilities Act of 1990, 42 U.S.C. §§ 12101 et seq., for employment discrimination on the basis of disability, or retaliation for exercising rights under this statute.					
	NOTE: To sue under the Americans With Disabilities Act, you generally must have received a notice of right-to-sue letter from the EEOC.					
	Other (describe)					
	2					
	S e 					

 This Court has subject matter jurisdiction over this case under the above-listed statutes and under 28 U.S.C. §§ 1331 and 1343.

<u>Parties</u>

Plaintiff.	Print your full name and mailing address below:	
Name	STEVEN AllEN Swinton	
Address	2447- HAZEL TRIVE S.E.	
	AtlANTA, GEORGIA 30316	
Defendant(s	Print below the name and address of each defendant listed on page 1 of this form:	
Name	S BEHER Foods d/B/A PAPA JUHNS PIZ	ZA
Address	1098-MORE LAND AVE S.E.	
	AflANTA GA. 30316	
Name		
Address		
	<u> </u>	
Name		
Address		
	Location and Time	
	d discriminatory conduct occurred at a location <u>different</u> from the vided for defendant(s), state where that discrimination occurred:	
No		

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When die	the alleged discrimination occur? (State date or time period)
ij	EC-4-2014 600 pm
AL .	Administrative Procedures
	ile a charge of discrimination against defendant(s) with the EBOC federal agency? Yes No
If	you checked "Yes," attach a copy of the charge to this complaint.
Have you	received a Notice of Right-to-Sue letter from the EBOC? No
	you checked "Yes," attach a copy of that letter to this complaint and the date on which you received that letter to the date of which you received that letter to the date of which you received that letter to this complaint and the date of which you received that letter to this complaint and the date of which you received that letter to this complaint and the date of the date
If you are	suing for age discrimination, check one of the following:
_/	60 days or more have elapsed since I filed my charge of ag discrimination with the EEOC
	Less than 60 days have passed since I filed my charge of as discrimination with the EEOC
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	nent with a State	cy of the State of Georgia or unsuccessful agency, did you file a complaint again mmission on Equal Opportunity?
Yes	No	Not applicable, because I we not an employee of, or applicant with a State agency.
Georgia C happened	Commission on E with it (i.e., the co	th a copy of the complaint you filed with to qual Opportunity and describe below whomplaint was dismissed, there was a hearing there was an appeal to Superior Court):
	2	
_		
employment wit	th a Federal age hed by that age	Sederal agency or unsuccessfully sougncy, did you complete the administration for persons alleging denial of equ
employment with process establish	th a Federal age hed by that age	ncy, did you complete the administrati
employment with process establishemployment oppour Yes If you continued the process of the process established the process established the process of the p	th a Federal ages thed by that ages portunity?No	ncy, did you complete the administration of persons alleging denial of equal to the person of applicable, because I was not an employee of, or applicant with
employment with process establishemployment oppour Yes If you continued the process of the process established the process established the process of the p	th a Federal ages hed by that ages portunity? No hecked "Yes,"	Not applicable, because I was not an employee of, or applicant with a Federal agency.
employment with process establishemployment oppour Yes If you continued the process of the process established the process established the process of the p	th a Federal ages hed by that ages portunity? No hecked "Yes,"	Not applicable, because I was not an employee of, or applicant with a Federal agency.

Nature of the Case

12.	The conduapply):	ct complained about in this lawsuit involves (check only those that
		failure to hire me failure to promote me demotion reduction in my wages working under terms and conditions of employment that differed from similarly situated employees harassment retaliation termination of my employment failure to accommodate my disability other (please specify)
13.	I believe the apply):	my race or color, which is
		my opposition to a practice of my employer that I believe violated the federal anti-discrimination laws or my participation in an EBOC investigation
		other (please specify)

14. Write below, as clearly as possible, the essential facts of your claim(s). Describe specifically the conduct that you believe was discriminatory or retaliatory and how each defendant was involved. Include any facts which show that the actions you are complaining about were discriminatory or retaliatory. Take time to organize your statements; you may use numbered paragraphs if you find that helpful. Do not make legal arguments or cite cases or statutes.

EVER TAUGHT

(Attach no more than five additional sheets if necessary, type of write legibly only on one side of a page.)

15.	Plaintiff	still works for defendant(s) no longer works for defendant(s) or was not hired
16.		a disability-related claim, did defendant(s) deny a request for accommodation? Yes No
	If yo	u checked "Yes," please explain:
	î,	
17.	If your cas trial. Do yo	e goes to trial, it will be heard by a judge <u>unless</u> you elect a jury ou request a jury trial? Yes No
		Request for Relief
		ne allegations of discrimination and/or retaliation stated above, at the Court grant the following relief (check any that apply):
		Defendant(s) be directed to
		Money damages (list amounts)
	1	Costs and fees involved in litigating this case
		Such other relief as my be appropriate

PLEASE READ BEFORE SIGNING THIS COMPLAINT

Before you sign this Complaint and file it with the Clerk, please review Rule 11 of the Federal Rules of Civil Procedure for a full description of your obligation of good faith in filing this Complaint and any motion or pleading in this Court, as well as the sanctions that may be imposed by the Court when a litigant (whether plaintiff or defendant) violates the provisions of Rule 11. These sanctions may include an order directing you to pay part or all of the reasonable attorney's fees and other expenses incurred by the defendant(s). Finally, if the defendant(s) is the prevailing party in this lawsuit, costs (other than attorney's fees) may be imposed upon you under Federal Rule of Civil Procedure 54(d)(1).

Signed, this	day of	, 20
	(Signature of plain	itiff pro se)
	(Printed name of p	laintiff pro se)
	(street address)	
	(City, State, and zi	p code)
	(email address)	
	(telephone number	·)

EEOC Form 161 (11/09)

1098 Moreland Ave. Atlanta, GA 30316

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

21		DISMISSAL AND NO	TICE OF	RIGHTS	
244	ven Swinton 7 Hazel Dr. Inta, GA 30316		From:	Atlanta District Offic 100 Alabama Street, Suite 4R30 Atlanta, GA 30303	
		erson(s) aggrieved whose identity is AL (29 CFR §1601.7(a))			
EEOC Cha	rge No.	EEOC Representative			Telephone No.
Prof. au	2 National and a second	Richard S. Strouse,			
410-201	5-01627	Investigator			(404) 562-6832
THE EEC	OC IS CLOSING ITS FIL	E ON THIS CHARGE FOR T	HE FOLLO	WING REASON:	
	The facts alleged in the	charge fail to state a claim under	any of the s	tatutes enforced by the E	EOC.
	Your allegations did not	involve a disability as defined by	the America	ns With Disabilities Act.	
	The Respondent emplo	ys less than the required number	of employee	es or is not otherwise cove	ered by the statutes.
Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the discrimination to file your charge				the date(s) of the alleged	
The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude information obtained establishes violations of the statutes. This does not certify that the respondent is in compliant the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge				ondent is in compliance with	
	The EEOC has adopted	the findings of the state or local	fair employm	ent practices agency that	investigated this charge.
	Other (briefly state)				
		- NOTICE OF SI (See the additional information			
Discrimir You may lawsuit m	nation in Employment A file a lawsuit against the ust be filed WITHIN 90	abilities Act, the Genetic In Act: This will be the only notic respondent(s) under federal I DAYS of your receipt of thi ased on a claim under state law	e of dismiss aw based o s notice; o	sal and of your right to on this charge in federa r your right to sue base	sue that we will send you. If or state court. Your
alleged El		must be filed in federal or state means that backpay due for a ollectible			
		On behalf	of the Comm	nission 62	
			//	7_	JAN 2 2 2015
Enclosures	(s)	Bernice William District D		ugh,	(Date Mailed)
A. C.	Owner PAPA JOHN'S PIZZA		maaawee 3.87		

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CHARGE OF DISCRIMINATION	Charge	Presented To:	Agency(ies) Charge No(s):
This form is affected by the Privacy Act of 1974. See enclosed Privacy Act		FEPA	
Statement and other information before completing this form.	X	EEOC	410-2015-01627
,			and EEOC
State or local Ag	gency, if any		
Name (indicate Mr., Ms., Mrs.) Mr. Steven Swinton		Home Phone (Incl. Area (
	12 1 71D O1-	(404) 452-696	11-08-1956
City, State 2447 Hazel Dr., Atlanta, GA 30316	te and ZIP Code		
Named is the Employer, Labor Organization, Employment Agency, Apprentices Discriminated Against Me or Others. (If more than two, list under PARTICULAR		State or Local Governmen	nt Agency That I Believe
Name		No. Employees, Members	Phone No. (Include Area Code)
S BETTER FOODS D/B/A PAPA JOHNS PIZZA		15 - 100	(404) 622-0600
Street Address City, Stat	te and ZIP Code		
1098 Moreland Ave., Atlanta, GA 30316			
			(4)
Name		No. Employees, Members	Phone No. (Include Area Code)
Street Address City, Stat	te and ZIP Code		
DISCRIMINATION BASED ON (Check appropriate box(es).)		DATE(S) DISCR Earliest	IMINATION TOOK PLACE Latest
RACE COLOR SEX RELIGION	NATIONAL ORIG		
RETALIATION X AGE X DISABILITY G	ENETIC INFORMATION	ON	000 000 000 P. T.
OTHER (Specify)	- I O I O O O O		CONTINUING ACTION
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):			
I was employed as a Pizza Delivery Driver from Septe December 4, 2014, I was discharged. Morris (last name unknown), Supervisor, did not give I believe that I have been discriminated against beca Americans with Disabilities Act of 1990, as amended Discrimination in Employment Act of 1967, as amended	e me a reasor use of my dis , and my age	n for the discharg	je. on of Title I of the
want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their	NOTARY - When	necessary for State and Loc	al Agency Requirements
declare under penalty of perjury that the above is true and correct.		nowledge, information ar	ve charge and that it is true to nd belief.
Jan 05, 2015	SUBSCRIBED AN	D SWORN TO BEFORE ME	THIS DATE
Date Charging Party Signature	-		